

DEPARTMENT OF HEALTH SERVICES

714/744 P Street

P. O. Box 942732

Sacramento, California 94234-7320

(916) 657-1460



July 24, 1997

rec'd 8/1/97

PPL No. 97-013

To All County Medi-Cal Administrative Activities (MAA)/
Targeted Case Management (TCM) Coordinators and
Advisory Committee Members

NEW CATEGORIES FOR "OUTREACH B" CAMPAIGNS/ACTIVITIES

The purpose of this transmittal is to inform all Local Governmental Agencies (LGAs), participating in the Medi-Cal Administrative Activities (MAA) program, of a policy change regarding Outreach B campaigns/activities. This change will provide more options for the LGAs in determining the discounting method.

The portion of costs that can be claimed as allowable for some MAA is based on the Medi-Cal percentage. Costs must be reduced or "discounted" by the Medi-Cal percentage when the activity benefits or involves both Medi-Cal and non-Medi-Cal populations. Outreach B activities and associated costs are discounted by the appropriate Medi-Cal percentage.

The previous policy specified that either the (1) actual Medi-Cal client count, (2) the county-wide average Medi-Cal percentage, or (3) any other reasonable method, may be used to calculate the Medi-Cal percentage discount.

The amended language establishes two separate categories of Outreach B campaigns/activities. The two categories are **Outreach B1**, discounted by the actual Medi-Cal client count or any other reasonable method; and **Outreach B2**, discounted by the county-wide Medi-Cal average. This change will give the LGAs the option of using either the B1 or B2 discounting method for *each* Outreach B campaign/activity. The effective date for claiming costs for Outreach B1 and/or B2 will be for the quarter beginning July 1, 1997. LGAs will be able to separately time-study Outreach B1 and/or B2 activities. The remainder of the policy relative to claiming for Outreach B campaigns/activities remains the same.

The "MAA Claiming Plan Instructions" for Outreach B were previously contained on pages 3, 4, 7, 8, and 21 of Policy and Procedure Letter (PPL) No. 96-015, and have been

(forms not scanned - illegible)

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amended to accommodate Outreach B1 and B2 and are enclosed for your information and use. The "MAA Invoice Instructions" (PPL No. 96-006) will also be amended and issued in a forthcoming PPL.

Please note that in order to claim for Outreach B1 and/or Outreach B2 activities for quarters beginning July 1, 1997, **amendments** to the MAA Claiming Plans must be submitted by **September 30, 1997**. All previous claiming plans submitted with Outreach B must be amended. Failure to do any of the following will result in your ineligibility to claim for employees who perform Outreach B. The sections of the MAA Claiming Plans that need to be amended and resubmitted include:

- (1) The Claiming Unit Functions form, contained on page 3 of the revised MAA Claiming Plan Instructions (enclosed). The *Description of the Claiming Unit Functions* and the *Grid* portion of this form will need to be amended.
- (2) The Medi-Cal Outreach B Claiming Plan form specifying which Outreach B activity is being claimed. NOTE: Effective July 1, 1997, two separate claiming plan forms will be available (which are enclosed): (1) Actual Client Count or Other Method form (contained on revised page 7-a) for claiming Outreach B1; and (2) County-Wide Medi-Cal Average form (contained on new page 7-b) for claiming Outreach B2. You must amend your Claiming Plan using one or both of these forms.
- (3) Position descriptions/duty statements with Outreach B activities must be amended to correctly identify activities as Outreach B1 or Outreach B2, according to the MAA Claiming Plan Instructions.

Please return an *original* plus one *copy* of the Outreach B1 and Outreach B2 amendments to the MAA Claiming Plans to the following address:

**Department of Health Services
Administrative Claiming Unit
714 P Street, Room 1640
P.O. Box 942732
Sacramento, CA 94234-7320**

